

L99000 002 766

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

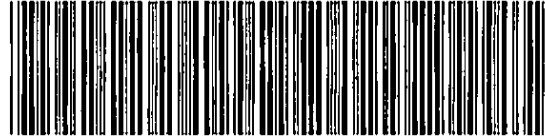
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DEC 11 2019

11/12/19

*Raymond J. Rotella
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Lawrence M. Kosto
lkosto@kostoandrotella.com
C. Hugh Blanton, Jr.
hblanton@kostoandrotella.com

KOSTO & ROTELLA, P.A.
ATTORNEYS AT LAW
www.kostoandrotella.com

ORLANDO

Reply to:

November 4, 2019
Date:

Orlando Office:
619 East Washington Street
Orlando, Florida 32801
Post Office Box 113
Orlando, Florida 32802
407/425-3456
Fax 407/423-9002
info@kostoandrotella.com

Jacksonville Office:
301 W. Bay Street, Suite 1410
Jacksonville, Florida 32202
Post Office Box 4759
Jacksonville, Florida 32201
904/358-7483
Fax 904/853-7786

*Certified Business Bankruptcy
Specialist and Member of Florida
and New Jersey Bar

Registration Section
Division of Corporation
Post Office Box 6327
Tallahassee, Florida 32314

Re: Gemstone Properties, L.L.C.

Dear Sir/Madam:

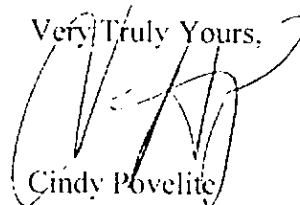
Enclosed please find our firm's check in the amount of \$100 to process the following documents:

- 1) Disassociation or Resignation of Member – Linda Snell
- 2) Disassociation or Resignation of Member – Graham Snell
- 3) Articles of Amendment
- 4) Statement of Change of Rights of Registered Office or Registered Agent

Please forward our office the receipt for processing same in the enclosed self-addressed, stamped envelope.

Should you need any thing further, please contact the undersigned.

Very Truly Yours,



Cindy Povelite
Legal Assistant to
Lawrence M. Kosto, Esquire

/cap
enc(s): as stated above

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Gemstone Properties, L.L.C.
(Name of Limited Liability Company)

The enclosed member, resignation or dissociation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Lawrence M. Kosto, Esquire

(Contact Person)

Kosto & Rotella, P.A.

(Firm/Company)

619 E. Washington Street

(Address)

Orlando, FL 32801

(City/State and Zip Code)

For further information concerning this matter, please call:

Lawrence M. Kosto at 407 425-3456
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:
☒ \$25 Filing Fee ☐ \$55 Filing Fee & Certified Copy

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314



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FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER FROM
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

(Pursuant to 605.0216, Florida Statutes)

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: Gemstone Properties, L.L.C.

2. The Florida document/registration number assigned to this limited liability company is:
L99000002766

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 10/31/2019

4. I, Linda Snell, hereby withdraw/resign as a
(Print Name of Person Resigning)

Manager

(Print Title)

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

LCSell

Signature of Dissociating Member or Resigning Manager

Filing Fee: \$25.00 (Required)
Certified Copy: \$30.00 (Optional)